GROUP/ORGANIZATION/ EVENT WAIVER AND RELEASE OF LIABILITY

ON BEHALF OF:	•
officials, officers, agen LIABILITY for any de actions, including any a such acts or omissions	RELEASE and DISCHARGE the City of Chula Vista, its elected ts, and employees or any other person from any and all ath, disability, personal injury, property damage, property theft or alleged or actual negligent acts or omissions, regardless of whether are active or passive, which may accrue to myself or members of or our heirs in connection with the Adopt-A-Park program.
representation that I ha members of my organiz participation. Further, n	acknowledge that the CITY OF CHULA VISTA is relying on my ve authorization to sign this document and that I will provide all zation/group a completed copy of this Waiver prior to our my organization will provide a Certificate of Insurance evidencing ability Limit of \$1,000,000 Per Occurrence under which "City of a Additional Insured."
Vista, its elected and ap or claims made by me of or entities as a result of with my/our participatinegligence or sole will representatives. Such it	END, INDEMNIFY AND HOLD HARMLESS the City of Chula opointed officers, agents and employees from any and all liabilities or my organization/group, my /our heirs and any other individuals any of my/our acts or omissions arising from or in connection on in the event except for those claims arising from the sole ful conduct of the City, its officers, employee, volunteers or other indemnification includes liability settlements, judgments, damage dattorney fees and expenses associated with any such claims or
	ave read this document, understand it's content, and am authorized on behalf of all members of the group/organization I represent.
DATE:	
ORGANIZATION/ GROUP NAME:	
SIGNATURE:	
NAME:	
ADDRESS:	(Please Print)
-	